Exhibit X

OSC Use Only	
Reporting Code:	
Category Code:	
Date Contract Approved:	

Form A

State Consultant Services – Contractor's Planned Employment From Contract State Date Through the End of the Contract Term

State Agency Name: <u>SUNY Upstate Me</u>	dical University	Agency Code:	28110	
Contractor Name: Dept of Medicin. Contract Start Date Dapuary 3	e 3,2017		- souzsu + x-souz lanuary 2,20	
Employment Category/Description	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract	
29-1063,0	,5	2062	643,305	
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Total This Page			643,305	
Grand Total			643, 305	

Name of person who prepared t	this report	Matthew	HUTZ
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Title: ChiefAdministgator Preparer's Signature	Phone #: 315 - 464 - 8282
Preparer's Signature	
Date Prepared: 10/4/17	